



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 1/24/2018  
 Permit Number: BP-2018-000602  
 GPIN/Tax Map: 6777-47-9204/A3-1-A-2-0  
 Issued: 2.28.18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1462 Indy's Run Maidens, VA 23063	
	Owner Krickovic & Ziegler LLC	Phone # 804-569-9745
	Address PO Box 1510 Mechanicsville, VA 23116	Email lonnie@kandzbuilders.com
APPLICANT INFORMATION	Applicant/Contact SAME AS ABOVE	
	Address	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breeze H. 11 Sec. 1	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$ 20,496.00	Date Paid Due
	Front Setback 40' from ROW	Center Line Setback	Rear Setback 25'	CUP/Variance/COA
	Side Setback 10'	Side Setback 10'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: *Cash Proffer due before C.O. is issued. RP			
Planning & Zoning Officer: David Ford Date: 1/26/18				

CONTRACTOR INFORMATION	Contractor Krickovic & Ziegler, LLC		Phone (804) 569-9745
	Address PO Box 1510, Mechanicsville, VA 23116		
	Contractor License Number 2705100072	Type CLASS A	Expiration 11-30-2019

DESCRIPTION OF WORK	Scope of Work: Single family home with basement and attached garage. <sup>A</sup> partially finished			
	Proposed Use	Current Use N/A	Existing Buildings on Property NONE	# of Floors 1 plus basement
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 1/2	# of Bedrooms 4
	Finished Sq. Ft. 4306	Unfinished Sq. Ft. 1633	Total Sq. Ft. 5939	

Building Only - Excludes All Trades Permits		Application Fee \$ 2338.50 State Levy Fee \$ 47.57 Septic/Well Fee \$ 40- Zoning Fee \$ 50- RLD \$ 100- SWP \$ 200- Total \$ 2966.07
Value of Work	\$ 517,000	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	Date 1/24/18	

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Richmond Settlement Solutions Telephone: (804) 477-8858

Mailing Address: 9030 Stony Point Parkway, Suite 145  
Richmond, VA 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Other Fees that may be applicable  
RLD \$100.00 for Residential disturbing over 10,000 square feet  
Stormwater \$200 for Residential in certain subdivisions  
Septic & well processing \$40.80 for Commercial & Residential  
Septic only processing \$25.50 for Commercial & Residential  
Zoning Commercial \$100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL MICHAEL BROOKING DATE 1.22.18.  
Code Official



# BUILDING PERMIT APPLICATION

Application Date: 1-29-2018

Permit Number: *BP-2018-00066*

GPIN/Tax Map: 6777-07-2439 / *43-39-0-2-0*

Issued: *2-26-18*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection  
P.O. Box 119  
Goochland, VA 23063  
(804) 556-5815 Fax (804) 556-5651  
TDD 711 VA Relay

Residential  Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <b>2333 LANES END PLACE</b>	
	Owner <b>MAIN STREET HOMES</b>	Phone # <b>804-423-0314</b>
	Address <b>PO BOX 461, MIDLOTHIAN VA 23113</b>	Email <b>mtessier@gomsh.com</b>
APPLICANT INFORMATION	Applicant/Contact <b>MARIAN TESSIER</b>	
	Address <b>PO BOX 461, MIDLOTHIAN VA 23113</b>	Email <b>mtessier@gomsh.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Lanes End</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$14,364.00</i>	Date Paid <i>Due</i>
	Front Setback <i>40' from ROW</i>	Center Line Setback <i>65'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA <b>---</b>
	Side Setback <i>10'</i>	Side Setback <i>10'</i>	Flood Zone <b>---</b>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash proffer due before C.O. is issued RP</i>			
Planning & Zoning Officer <i>David Floyd</i> Date <i>1/30/18</i>				

CONTRACTOR INFORMATION	Contractor <b>MAIN STREET HOMES</b>		Phone <b>804-423-0314</b>
	Address <b>PO BOX 461 MIDLOTHIAN VA 23113</b>		
	Contractor License Number <b>2705039441</b>	Type <b>A</b>	Expiration <b>5-2018</b>

DESCRIPTION OF WORK	Scope of Work: <b>NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE</b>			
	Proposed Use	Current Use	Existing Buildings on Property <b>NO</b>	# of Floors <b>2</b>
	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>4</b>	# of Bedrooms <b>3</b>
	Finished Sq. Ft. <b>3039</b>	Unfinished Sq. Ft. <b>697</b>	Total Sq. Ft. <b>3736</b>	

Building Only - Excludes All Trades Permits

Value of Work *249869 254,062.50*

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant *Marian Tessier* Date **1-29-2018**

Application Fee	\$ <i>1,155.28</i>
State Levy Fee	\$ <i>23.91</i>
Septic/Well Fee	\$ <i>40.00</i>
Zoning Fee	\$ <i>50.00</i>
RLD	\$ <i>100.00</i>
SWP	\$ <i>200.00</i>
Total	\$ <i>1,569.19</i>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: BON AIR TITLE Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ In the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD 10 CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 1-29-2018

Permit Number: BP-2018-00067

GPIN/Tax Map: 6777-07-0655 / 43-39-0-1-0

Issued: 2-26-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <b>2335 LANES END PLACE</b>	
	Owner <b>MAIN STREET HOMES</b>	Phone # <b>804-423-0314</b>
	Address <b>PO BOX 461, MIDLOTHIAN VA 23113</b>	Email <b>mtessier@gomsh.com</b>
APPLICANT INFORMATION	Applicant/Contact <b>MARIAN TESSIER</b>	
	Address <b>PO BOX 461, MIDLOTHIAN VA 23113</b>	Phone # <b>804-423-0314</b>
		Email <b>mtessier@gomsh.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lanes End</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$14,364.00</u>	Date Paid <u>Due</u>
	Front Setback <u>40' from ROW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>*Cash Proffer is due before C.O. is issued RP</u>		
	Planning & Zoning Officer <u>David Floyd</u>	Date <u>1/30/18</u>		

CONTRACTOR INFORMATION	Contractor <b>MAIN STREET HOMES</b>		Phone <b>804-423-0314</b>
	Address <b>PO BOX 461 MIDLOTHIAN VA 23113</b>		
	Contractor License Number <u>2705039441</u>	Type <u>A</u>	Expiration <u>5-2018</u>

DESCRIPTION OF WORK	Scope of Work: <b>NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE, BASEMENT</b>			
	Proposed Use	Current Use	Existing Buildings on Property NO	
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 4	# of Floors 2
	Finished Sq. Ft. 4403	Unfinished Sq. Ft. 1011	Total Sq. Ft. 5414	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>334,751</u> <u>417,222.50</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Marian Tessier Date 1-29-2018

Application Fee	\$ <u>1,889.50</u>
State Levy Fee	\$ <u>38.59</u>
Septic/Well Fee	\$ <u>40.00</u>
Zoning Fee	\$ <u>-50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>2,000.00</u>
<b>Total</b>	\$ <u>2,318.09</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: BON AIR TITLE Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 1/11/18Permit Number: BP-2018-00048GPIN/Tax Map: 43-38B-4/6777-46-9582Issued: 2-23-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential

Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1657 Indys Run Maidens, VA</u>	
	Owner <u>Hunton Station, LLC</u>	Phone # <u>804-400-7914</u>
	Address <u>4815 Bethlehem Rd</u>	Email <u>ttowers66@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Thomas Towers</u>	
	Address <u>—</u>	Phone # <u>804-400-7914</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze Hill</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>20,496.<sup>00</sup></u>	Date Paid <u>DUE</u>
	Front Setback <u>40' off ROW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>CASH proffer due before C.O. is issued</u>
	Side Setback <u>10</u>	Side Setback <u>20</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Anna Barnes</u> Date <u>1-23-2018</u> <u>R-P</u>	

CONTRACTOR INFORMATION	Contractor <u>Hallmark Home Builders Inc.</u>		Phone
	Address <u>7714 C Whitepine Rd, Richmond, VA 23237</u>		
	Contractor License Number <u>2701039083</u>	Type <u>Class A cont</u>	Expiration <u>9/30/19</u>

DESCRIPTION OF WORK	Scope of Work: <u>New construction home w/ attached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property <u>NONE</u>	# of Floors <u>2</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>3.5</u>	# of Bedrooms <u>5</u>
	Finished Sq. Ft. <u>3173</u>	Unfinished Sq. Ft. <u>939, 1,458</u>	Total Sq. Ft. <u>2112, 4631</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$300,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 1/22/18

Application Fee	\$ <u>1,362.00</u>
State Levy Fee	\$ <u>280.00</u>
Septic/Well Fee	\$ <u>4,000</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>2,000.00</u>
Total	\$ <u>4,782.00</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Kim Wright *Thompson, Smithers-* Telephone: 804 288 4007

Mailing Address: 1503 SANTA ROSA Rd  
Richmond VA 23229

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_ Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_ (Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Other Fees that may be applicable  
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Stormwater \$200 for Residential in certain subdivisions  
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Septic only processing \$25.50 for Commercial & Residential  
Zoning Commercial \$100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 2-9-18  
 Application Accepted: BP-2018-00094  
 Old Map Number: 7115-46-4622/58-48-8-5A-1  
 ORIN Issued: 2-22-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 852 Merewood Court Manakin-Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
	Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Kinloch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District <u>RPUD</u>	
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	C O A	Flood Zone
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* Front setback / survey locate.</u>	

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.  
 Planning & Zoning Officer: David Floyd Date 2/12/18

Applicant/Contact: David Owen Phone 804-708-5120  
 Email: dowen@boonehomes.net

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
Description of Work	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018
	Scope of Work: New Single family home with attached Garage			
	SEWER Public/Private <u>XXXX</u>	WATER Public/Private <u>XXXX</u>	# of Bathrooms 4.5	
# of Floors 2	Total Sq. Ft. 5076	Finished Sq. Ft. 4296	Unfinished Sq. Ft. 780	# of Bedrooms 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	399,000.00
Excludes All Trades Permits	

Application Fee	\$ <u>1807.50</u>
Zoning Fee	\$ <u>50.-</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>36.15</u>
<b>TOTAL</b>	<b>\$ <u>1893.65</u></b>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Old Republic National Title Insurance Co Telephone: 804-281-7484

Mailing Address: 1800 Bayberry Court, Suite 104, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
P.O. Box 119  
Goochland, VA 23063  
(804) 556-5815 Fax (804) 556-5651  
TDD 711 VA Relay

Application Date: 12-29-17  
Permit Number: BP-2018-00006P  
GPIN/Tax Map: 6842-84-9548 / 13-24-0-116-0

Issued: 2-22-18  
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential       Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <b>3757 Boundary Run</b>	
	Owner <b>Blue Ridge Custom Homes</b>	Phone # <b>540-478-3110</b>
	Address <b>1186 Lickinghole Road Goochland VA 23063</b>	Email

APPLICANT INFORMATION	Applicant/Contact <b>Blue Ridge Custom Homes</b>		Phone # <b>540-478-3110</b>
	Address <b>1186 Lickinghole Road Goochland VA 23063</b>		Email <b>Nathanbrch@gmail.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Boundary Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>75' From ROW</u>	Center Line Setback <u>100' CL</u>	Rear Setback <u>35'</u>	CUP/Variance/COA —
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Ford</u> Date: <u>1/4/18</u>			

CONTRACTOR INFORMATION	Contractor <b>Blue Ridge Custom Homes</b>		Phone <b>540-478-3110</b>
	Address <b>1186 Lickinghole Road Goochland VA 23063</b>		
	Contractor License Number <b>2705086712</b>	Type <b>A</b>	Expiration <b>7-31-18</b>

DESCRIPTION OF WORK	Scope of Work: <b>Single Family Home with attached garage</b>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors <b>2</b>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>3</b>	# of Bedrooms <b>4</b>
	Finished Sq. Ft. <b>2737</b>	Unfinished Sq. Ft. <b>1302</b>	Total Sq. Ft. <b>4039</b>	

<b>Building Only – Excludes All Trades Permits</b>		Application Fee \$ <u>1249.50</u> State Levy Fee \$ <u>25.79</u> Septic/Well Fee \$ <u>40-</u> Zoning Fee \$ <u>50-</u> RLD \$ <u>100-</u> SWP \$ <u>200-</u> Total \$ <u>1665.29</u>
Value of Work	<u>275000.00</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<u>[Signature]</u>	Date <u>12-29-17</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Aurora Title Telephone: 804-729-9005

Mailing Address: 2203 Pump Road Henrico VA 23233

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 12.20.17  
 Permit Number: BP-2017-01001  
 GPIN/Tax Map: 6842.11.0913/13.10.1.P1  
 Issued: 2-22-18  
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

**OWNER INFORMATION**  
 Site Address: 4126 BROAD STREET RD GUM SPRING 23065  
 Owner: CARL & MEREDITH MILLIGAN  
 Address: AS ABOVE

**APPLICANT INFORMATION**  
 Applicant/Contact: JEFFREY R STARKE  
 Address: 3108 ROCK CRESS LN SANDY HOOK 23153

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>—</u>	Date Paid: <u>—</u>
Front Setback: <u>55' ROW/PL</u>	Center Line Setback: <u>—</u>	Rear Setback: <u>55'</u>	CUP/Variance/COA: <u>—</u>
Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: <u>—</u>	

APPROVED  REJECTED  COMMENTS: \* Existing single story dwelling must be removed 60 days after C.O. is issued  
 Planning & Zoning Officer: David Floyd Date: 12/20/17

**CONTRACTOR INFORMATION**  
 Contractor: WOODRIGHT CONSTRUCTION  
 Address: 3108 ROCK CRESS LANE SANDY HOOK VA 23153  
 Contractor License Number: #2705032394A Type: CLASS A Expiration: 2-28-2018

**DESCRIPTION OF WORK**  
 Scope of Work: NEW SFD attached garage

Proposed Use	Current Use	Existing Buildings on Property	# of Floors
SEWER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms: <u>2 1/2</u>	# of Bedrooms: <u>3</u>
Finished Sq. Ft.: <u>1992</u>	Unfinished Sq. Ft.: <u>576 1020</u>	Total Sq. Ft.: <u>2568 3012</u>	

**Building Only - Excludes All Trades Permits**

Value of Work: <u>\$150,000</u> <del>\$187,650.00</del>	Application Fee: <u>\$256.42</u>
	State Levy Fee: <u>\$17.13</u>
	Septic/Well Fee: <u>\$</u>
	Zoning Fee: <u>\$50-</u>
	RLD: <u>\$</u>
	SWP: <u>\$</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>12/24/2017</u>	Total: <u>\$923.55</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

*Issued 2-21-18*

Application Date: *2-14-18*  
 Application Accepted: *BD-2018-00105*  
 Old Map Number: *58-48-8-72-0*  
 GPIN: *7715-46-9463*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 861 Water Bridge Road Manakin-Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Kinloch Sec. 8</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	New Street Address		Zoning District <i>RPUD</i>	
	Front Setback <i>30' from Pavement</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit _____
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	C O A _____	Flood Zone _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>* Front Setback, Survey locate.</i>			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer *David Taylor* Date *2/15/18*

Applicant/Contact: **David Owen** Phone **804-708-5120**

Email: **dowen@boonehomes.net**

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.	Phone 804-784-6192
	Address 129 Broad Street Road, Manakin Sabot, VA 23103	
	Contractor License Number 2705 022198A	Type BLD
		Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage			
	SEWER Public/XXXX	WATER Public/XXXX	# of Bathrooms 3.5	
	# of Floors 2	Total Sq. Ft. 4689	Finished Sq. Ft. 4159	Unfinished Sq. Ft. 530
			# of Bedrooms 3	

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	332,000.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>1,306.00</i>
Zoning Fee	\$ <i>50.00</i>
Septic/Well Fee	\$ <i>0</i>
State Levy Fee	\$ <i>30.12</i>
<b>RLD Total</b>	<b>\$ <i>1,586.12</i></b>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant *[Signature]*

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Old Republic National Title Insurance Co Telephone: 804-281-7484

Mailing Address: 1800 Bayberry Court, Suite 104, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee

RLD \$ 100.00

Septic & well \$ 40.80 For Commercial & Residential

Septic only \$ 25.44 for Commercial & Residential

Zoning Commercial \$ 100.00

Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 1-19-18  
 Permit Number: BP-2018-00045  
 GPIN/Tax Map: 6769-23-6540/30-13-B-4-0  
 Issued: 2.14.18

Residential       Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>2675 Mossour Drive Goochland, VA 23063</u>	
	Owner <u>James + Erin Tucker</u>	Phone # <u>804-378-0970</u>
APPLICANT INFORMATION	Address <u>13724 Queensgate Rd. M.lothian, VA 23114</u>	Email <u>tuckerfamily2x2@verizon.net</u>
	Applicant/Contact <u>Harring Construction Co. / Jeremy Harring</u>	Phone # <u>804-739-3405</u>
	Address <u>22221 Pear Orchard Rd Moseley, VA 23120</u>	Email <u>Sharring@harringconstruction.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Aldwyck</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>80' off ROW</u>	Center Line Setback	Rear Setback <u>35</u>	CUP/Variance/COA
	Side Setback <u>20</u>	Side Setback <u>35' off ROW</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Office: <u>Amelia Barnes</u> Date: <u>1/23/2018</u> <u>A-2</u>		

CONTRACTOR INFORMATION	Contractor <u>Harring Construction Co.</u>		Phone <u>804-739-3405</u>
	Address <u>22221 Pear Orchard Rd M.lothian, VA 23120</u>		
	Contractor License Number <u>2705021378</u>	Type <u>Class A</u>	Expiration <u>7-31-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>Residential single family dwelling with attached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors <u>2</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>4 1/2</u>	# of Bedrooms <u>5</u>
	Finished Sq. Ft. <u>3990 #</u>	Unfinished Sq. Ft. <u>787 #</u>	Total Sq. Ft. <u>4,777 #</u>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>1541.55</u>
Value of Work	<u><del>528</del> 339,900</u>	State Levy Fee	\$ <u>21.63</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ <u>40.-</u>
		Zoning Fee	\$ <u>50.-</u>
		RLD	\$ <u>100.00</u>
		SWP	\$ <u>-</u>
		Total	\$ <u>1,713.18</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>1/19/2018</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Action Title + Closings Telephone: 804-744-4061

Mailing Address: 5104 W. Village Green Dr. Suite 103  
Midlothian, VA 23112

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD 12 CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 1/8/18 Rec: 1-9-18  
 Permit Number: BP 2018-00024  
 GPIN/Tax Map: 57-39-1/7706-80-7905  
 Issued: 2.13.18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1301 Sabot Creek Court Manakin-Sabot				
	Owner Don Sloane and Joey Rick	Phone # 301-580-7497			
	Address				
APPLICANT INFORMATION	Applicant/Contact Southern Traditions - Elaine Reeder				
	Address P.O. Box 4314 Glen Allen, Va 23058	Phone # 804-516-9908 Email ereeder@southerntraditions.com			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Sabot Creek	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$10,444.00	Date Paid Paid	
	Front Setback 40' from ROW	Center Line Setback	Rear Setback 25'	CUP/Variance/COA	
	Side Setback 35' from Sabot Creek Dr.	Side Setback 10'	Flood Zone		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: [REDACTED]				
	Planning & Zoning Officer David Floyd		Date 1/11/18		RP
CONTRACTOR INFORMATION	Contractor Southern Traditions		Phone 804-516-9908		
	Address P.O. Box 4314 Glen Allen, Va 23058				
	Contractor License Number 2705082094	Type Class A	Expiration 2/28/18		
DESCRIPTION OF WORK	Scope of Work: New single family home attached garage				
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors 2	
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 1/2	# of Bedrooms 4	
	Finished Sq. Ft. 4237	Unfinished Sq. Ft. 1446	Total Sq. Ft. 5683		

Building Only - Excludes All Trades Permits

Value of Work \$505,00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant Elaine Reeder Date 1/8/18

Application Fee	\$2281.50
State Levy Fee	\$16.49
Septic/Well Fee	\$40-
Zoning Fee	\$50-
RLD	\$100-
SWP	\$200-
Total	\$2920.99

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: R. Donald Ford, Jr. - Gwen Shifflett Telephone: 320-2061

Mailing Address: 2727 Buford Rd Suite A Richmond, Va. 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_ Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_ (Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD 8 CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

*\* Replace Fire Damaged Home.*



**BUILDING PERMIT APPLICATION**

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 1/17/18  
 Permit Number: BP-2018-00046  
 GPIN/Tax Map: 21-1-0-56 D/6250-83-5028  
 Issued: 2-6-18  
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential  Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

**OWNER INFORMATION**  
 Site Address: 3131 Three Chopt Rd  
 Owner: Carl Minor Phone #: 804-929-7631  
 Address: 3131 Three Chopt Rd Email:

**APPLICANT INFORMATION**  
 Applicant/Contact: Wonderview Homes David JINNETT Phone #: 804-216-7222  
 Address: Po Box 71595 Richmond VA 23255 Email: jinnettco@aol.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
Front Setback <u>100' 6" RBC</u>	Center Line Setback	Rear Setback <u>35</u>	GUP/Variance/COA
Side Setback <u>20</u>	Side Setback <u>20</u>	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Auto Barnes 1-24-2018 HZ</u>			
Planning & Zoning Office:			

**CONTRACTOR INFORMATION**  
 Contractor: Wonderview Homes Phone: 804-216-7222  
 Address: Po Box 71595 Richmond VA 23255  
 Contractor License Number: 2705135028A Type: Class A 201 RBC Expiration: 6/18

**DESCRIPTION OF WORK**  
 Scope of Work: Demolish old home which was burnt in a fire.  
Build new single family dwelling  
use existing well & septic.

Proposed Use: <u>SFD Res</u>	Current Use: <u>SFD RES</u>	Existing Buildings on Property: <u>to be Demolished</u>	# of Floors: <u>1</u>
SEWER: <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER: <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms: <u>2</u>	# of Bedrooms: <u>3</u>
Finished Sq. Ft.: <u>1077</u>	Unfinished Sq. Ft.: <u>0</u>	Total Sq. Ft.: <u>1077</u>	

*called 1/23/20 need new site plan. NB need 1-24-20*

Building Only - Excludes All Trades Permits  
 Value of Work: 25,000.59,070

Application Fee	\$
State Levy Fee	\$
Septic/Well Fee	\$
Zoning Fee	\$
RUP	\$
SWP	\$
Total	\$

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: [Signature] Date: 1/17/18



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 1-11-18  
 Permit Number: BP-2018-00025  
 GPIN/Tax Map: 6786-44-9613 9316/55-11-0-B-0  
 Issued: 2-6-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1502 Cardwell rd. Crozier, VA 23039</u>	
	Owner <u>Blue Ridge Custom Homes</u>	Phone #
	Address <u>1186 Lickinghole Road Goochland VA 23063</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Blue Ridge Custom Homes</u>	Phone # <u>540-478-3110</u>
	Address <u>1186 Lickinghole Road Goochland VA 23063</u>	Email <u>Nathanbrch@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>---</u>	Date Paid <u>---</u>
	Front Setback <u>55' from ROW</u>	Center Line Setback <u>---</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>---</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>---</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Ford</u> Date <u>1/11/18</u> <u>A2</u>			

CONTRACTOR INFORMATION	Contractor <u>Blue Ridge Custom Homes</u>	Phone <u>540-478-3110</u>
	Address <u>1186 Lickinghole Road Goochland VA 23063</u>	
	Contractor License Number <u>2705086712</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Single family home on a crawl space (no attached garage)</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors <u>2</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>2</u>	# of Bedrooms <u>4</u>
	Finished Sq. Ft. <u>2633</u>	Unfinished Sq. Ft. <u>572</u>	Total Sq. Ft. <u>3205</u>	

**Building Only - Excludes All Trades Permits**

Value of Work <u>175,000</u> <del>\$218,925.00</del>	Application Fee <u>\$997.19</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>1-10-18</u>	State Levy Fee <u>\$20.74</u>
	Septic/Well Fee <u>\$40-</u>
	Zoning Fee <u>\$50-</u>
	RLD <u>\$100-</u>
	SWP <u>\$-</u>
	Total <u>\$1207.91</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Aurora Title Telephone: 804-729-9005

Mailing Address: 2203 Pump Road Henrico VA 23233

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Other Fees that may be applicable  
RLD \$100.00 for Residential disturbing over 10,000 square feet  
Stormwater \$200 for Residential in certain subdivisions  
Septic & well processing \$40.80 for Commercial & Residential  
Septic only processing \$25.50 for Commercial & Residential  
Zoning Commercial \$100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: BP-2018-00009  
 Permit Number: 1-5-18  
 GPIN/Tax Map: 9-1-41A / 5892-30-6855  
 Issued: 2-7-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>TBD Shannon Hill Rd. Columbia VA. 23038</u>			
	Owner <u>Lenora Danise Cooper-Mickey</u>		Phone # <u>804-814-2008</u>	
APPLICANT INFORMATION	Address <u>P.O. Box 16 Oilville VA. 23129</u>		Email	
	Applicant/Contact <u>Oakwood Homes Farmville Joe Haener</u>		Phone # <u>434-315-8956</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>2150 West 3rd St Farmville VA 23901</u>		Email <u>R749@clayton.net</u>	
	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>100' from R/W</u>	Center Line Setback <u>125' CL</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>C</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Front setback + side setback survey</u>			
Planning & Zoning Officer <u>David Floyd</u>		Date <u>1/5/18</u>		
CONTRACTOR INFORMATION	Contractor <u>Oakwood Homes Farmville</u>		Phone <u>434-315-8956</u>	
	Address <u>2150 West 3rd St. Farmville VA 23901</u>			
	Contractor License Number <u>2705048123</u>		Type <u>A</u>	Expiration <u>4-30-2019</u>
	Scope of Work: <u>Set up off-frame modular. ingan water septic</u>			
DESCRIPTION OF WORK	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>2</u>	# of Bedrooms <u>3</u>
	Finished Sq. Ft. <u>1958</u>	Unfinished Sq. Ft. <u>48</u>	Total Sq. Ft. <u>2006 1958</u>	
	Building Only - Excludes All Trades Permits			

Value of Work <u>150,000.00</u>	Application Fee \$ <u>687</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.	State Levy Fee \$ <u>14.54</u>
	Septic/Well Fee \$ <u>40</u>
	Zoning Fee \$ <u>50</u>
	RLD \$ <u>—</u>
	SWP \$ <u>—</u>
Signature of Applicant <u>Joe Haener</u> Date <u>1-5-18</u>	Total \$ <u>791.54</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 2-7-18  
 Permit Number: BP-2018-00082  
 GPIN/Tax Map: 7706-85-2555/57-1-0-68-0  
 Issued: 2-27-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1540 Manakin Rd, Manakin-Sabot VA 23103</u>	
	Owner <u>Deep Run Hunt Club</u>	Phone # <u>804-784-5386</u>
APPLICANT INFORMATION	Address <u>1540 Manakin Rd, Manakin-Sabot VA 23103</u>	
	Applicant/Contact <u>Adam Walker / Walker's Run Contractors Inc</u>	Email <u>deeprunhuntclub@verizon.net</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>781 Cedar Run Trail</u>	
	Applicant/Contact <u>Walker's Run Contractors Inc</u>	Phone # <u>804-980-6230</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>781 Cedar Run Trail</u>	
	Applicant/Contact <u>Walker's Run Contractors Inc</u>	Email <u>walkersruncontractors@outlook.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' From Row</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	_____
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____				
Planning & Zoning Officer <u>David Ford</u> Date <u>2/8/18</u> <span style="float: right;">A2</span>				

CONTRACTOR INFORMATION	Contractor <u>Walker's Run Contractors Inc</u>		Phone <u>804-980-6230</u>
	Address <u>781 Cedar Run Trail, Manakin-Sabot Va 23103</u>		
	Contractor License Number <u>2701029280</u>	Type <u>A CBC RBC</u>	Expiration <u>02-28-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build a storage shed on slab, 1 story, 2 access points, 2x4 Framing, Hipped Roof, Electrical</u>			
	Proposed Use <u>Storage</u>	Current Use _____	Existing Buildings on Property _____	# of Floors <u>1</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>640</u>	Total Sq. Ft. <u>640</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>50.50</u>
Value of Work <u>21,000</u>		State Levy Fee \$ <u>3.15</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>[Signature]</u>	Date <u>1-30-18</u>	Zoning Fee \$ <u>100-</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>2100.65</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 2-23-18  
 Permit Number: BP-2018-00126  
 GPIN/Tax Map: 0024-36-4703/03-34-0-2-A  
 Issued: 2-27-18  
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

**OWNER INFORMATION**  
 Site Address: 12830 WEST CREEK PARKWAY STE J 23238  
 Owner: CRENSHAW REALTY Phone #: 804 288 3189  
 Address: 1910 BYRD AVE #12 RICHMOND 23230 Email: hatcherj@concast.net

**APPLICANT INFORMATION**  
 Applicant/Contact: HUNDREDS SPIRIT BREWING Phone #: 804 708 0309  
 Address: 12830 WEST CREEK PARKWAY STE J Email: joe@hundredsprimitbrewing.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: West Creek Business Park Proffer:  Yes  No Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 Front Setback: 75' from Row Center Line Setback: 100' Rear Setback: 30' CUP/Variance/COA: \_\_\_\_\_  
 Side Setback: 10' Side Setback: 10' Flood Zone: \_\_\_\_\_

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Boyd Date: 2/23/18 MI

**CONTRACTOR INFORMATION**  
 Contractor: Guardian Builders Inc Phone: 804 357 625  
 Address: P.O. Box 829 Midlothian Va 23113  
 Contractor License Number: 2705031811 Type: Class A Expiration: \_\_\_\_\_

**DESCRIPTION OF WORK**  
 Scope of Work: OUTSIDE DECK  
 Proposed Use: DECK Current Use: PARKING Existing Buildings on Property: \_\_\_\_\_ # of Floors: 1  
 SEWER:  Public/Private  WATER:  Public/Private  # of Bathrooms: NA # of Bedrooms: NA  
 Finished Sq. Ft.: \_\_\_\_\_ Unfinished Sq. Ft.: 636 Total Sq. Ft.: 636

**Building Only - Excludes All Trades Permits**  
 Value of Work: \$10,000  
 I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: [Signature] Date: 12/17/17  
AS President

Application Fee	\$ 115.00
State Levy Fee	\$ 1.50
Septic/Well Fee	\$
Zoning Fee	\$ 50.-
RLD	\$
SWP	\$
Total	\$ 166.50



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential

Commercial

Application Date: 1/8/18 Rec: 1-9-18

Permit Number: BP 2018-00024

GPIN/Tax Map: 57-39-1/7706-80-7905

Issued: 2.13.18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1301 Sabot Creek Court Manakin-Sabot	
	Owner Don Sloane and Joey Rick	Phone # 301-580-7497
	Address	Email

APPLICANT INFORMATION	Applicant/Contact Southern Traditions - Elaine Reeder	Phone # 804-516-9908
	Address P.O. Box 4314 Glen Allen, Va 23058	Email ereeder@southerntraditions.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Sabot Creek	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$10,444.00	Date Paid Paid
	Front Setback 40' from ROW	Center Line Setback	Rear Setback 25'	CUP/Variance/COA
	Side Setback 35' from Sabot Creek Dr.	Side Setback 10'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: [REDACTED]	Planning & Zoning Officer David Floyd	Date 1/11/18	RP

CONTRACTOR INFORMATION	Contractor Southern Traditions	Phone 804-516-9908
	Address P.O. Box 4314 Glen Allen, Va 23058	
	Contractor License Number 2705082094	Type Class A

DESCRIPTION OF WORK	Scope of Work: New single family home <b>Revised 2-22-18</b> to change from a 2 car to 3 car attached garage			
	Proposed Use	Current Use	Existing Buildings on Property	
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 1/2	# of Floors 2
	Finished Sq. Ft. 4237	Unfinished Sq. Ft. 1446 + 264	Total Sq. Ft. 5683 + 264 = 5947	

Building Only - Excludes All Trades Permits

Value of Work	\$505,00
---------------	----------

7,710

Application Fee	\$2281.50
State Levy Fee	\$216.49
Septic/Well Fee	\$40-
Zoning Fee	\$50-
RLD	\$100-
SWP	\$200-
<b>Total</b>	<b>\$2920.99</b>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Elaine Reeder Date: 1/8/18



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 1-24-18

Permit Number: BP-2018-00072

GPIN/Tax Map: 6739-33-6188

Issued: 2-26-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>(4337) Riddles Bridge Rd, Goochland VA 23063</u>			
	Owner <u>Chris &amp; Kathy Coker</u>		Phone # <u>804 239 4639</u>	
	Address <u>PO Box 728, Goochland VA 23063</u>		Email <u>Kathryncoker@gmail.com</u>	
APPLICANT INFORMATION	Applicant/Contact <u>Kathy Coker</u>		Phone # <u>↑</u>	
	Address <u>PO Box 728, Goochland, VA 23063</u>		Email <u>↑</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>55' From R/W</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>C</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Fayd</u> Date <u>1/30/18</u> <span style="float: right;">A1</span>			
CONTRACTOR INFORMATION	Contractor <u>self ↑ owner</u>		Phone	
	Address			
	Contractor License Number		Type	Expiration
DESCRIPTION OF WORK	Scope of Work: <u>accessory structure 24x48 pole barn for storage of equipment (Tractor, lawn households)</u>			
	Proposed Use <u>7</u>	Current Use <u>7</u>	Existing Buildings on Property <u>None</u>	# of Floors <u>—</u>
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <u>—</u>	# of Bedrooms <u>—</u>
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>1,152</u>	Total Sq. Ft. <u>1,152</u>
	Building Only - Excludes All Trades Permits			

Value of Work	<u>\$ 7,700 / \$ 31,680.00</u>	Application Fee	\$ <u>124.56</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  Signature of Applicant <u>[Signature]</u> Date <u>1/22/18</u>		State Levy Fee	\$ <u>3.09</u>
		Septic/Well Fee	\$ <u>—</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>—</u>
		SWP	\$ <u>—</u>
		Total	\$ <u>182.65</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 2-14-18  
 Permit Number: BP-2018-00104  
 GPIN/Tax Map: 0822 89-3977 / 6-1-0-32-0  
 Issued: 2-23-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>4810 Three Chopt Road Louisa, VA 23093</u>	
	Owner <u>County of Goochland</u>	Phone # <u>804-556-5340</u>
APPLICANT INFORMATION	Address <u>1800 Sandy Hook Road</u>	Email <u>MParker@GoochlandVA.G</u>
	Applicant/Contact <u>Matthew Parker</u>	Phone # <u>804-382-7132</u>
	Address <u>1800 Sandy Hook Road</u>	Email <u>mparker@GoochlandVA.US</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>25' from Road</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____			
Planning & Zoning Officer: <u>David Floyd</u> Date: <u>2/14/18</u> <u>A1</u>				

CONTRACTOR INFORMATION	Contractor <u>Matthew Parker, on behalf of Goochland County</u>	Phone _____
	Address _____	
	Contractor License Number _____	Type _____
Expiration _____		

DESCRIPTION OF WORK	Scope of Work: <u>Utility 8' walls shed 12 x 24</u>			
	Proposed Use <u>Storage</u>	Current Use _____	Existing Buildings on Property _____	# of Floors _____
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms _____	# of Bedrooms _____
	Finished Sq. Ft. _____	Unfinished Sq. Ft. <u>288</u>	Total Sq. Ft. <u>288</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>+ 4,970.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Man Date: 02-08-2018

Application Fee	\$ _____
State Levy Fee	\$ _____
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ _____

*fees waived county project*



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 2-14-18  
 Permit Number: BP-2018-00102  
 GPIN/Tax Map: 43-1-0-59-0/6768-91-9  
 Issued: 2-22-18

Residential       Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>2161 Maidens Road</u>	
	Owner <u>Andrea Harris</u>	Phone # <u>804 556-2041</u>
	Address <u>2161 Maidens Rd</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>PLA-Mor Construction</u>	Phone # <u>804 781-0442</u>
	Address <u>P.O. Box 295</u>	Email <u>MaryAnn.pmc@comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>5' from ROW</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Boyd</u> Date <u>2/14/18</u> <span style="float: right;">A2</span>			

CONTRACTOR INFORMATION	Contractor <u>PLA-Mor Construction</u>	Phone <u>804 781-0442</u>
	Address <u>P.O. Box 295 Mech VA 23111</u>	
	Contractor License Number <u>2105 071041</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>15'x6" x40' Fiberglass Inground w/ Auto Cover meeting ASTM 1346-91 Code</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>640</u>	Total Sq. Ft. <u>640</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>59,400</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant M. Clements Date 1/29/18

Application Fee	\$ <u>279.30</u>
State Levy Fee	\$ <u>5.59</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>20-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>284.89</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD: 711 VA Relay

Residential  Commercial

Application Date: 2/12/2018

Permit Number: BP-2018-00099

GPIN/Tax Map: 6197-41-9628 / 45-1-0-72-C

Issued: 2-21-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1670 Shallowell Road Manakin, Sabot VA 23103	
	Owner Grady & Tyler McNeely	Phone # 434-806-7257
	Address 1670 Shallowell Road Manakin Sabot VA 23103	Email Tylerfmcneely@gmail.com

APPLICANT INFORMATION	Applicant/Contact Triple T Pools	Phone #
	Address	Email Triple T Pools@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 75' From Row	Center Line Setback 102'	Rear Setback 5'	CUP/Variance/COA
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David [Signature] Date: 2/13/18 AZ			

CONTRACTOR INFORMATION	Contractor Triple T Pools & Masonry LLC	Phone 804-337-0793
	Address 18493 Hollowing Creek Rd Beaverdam VA 23015	
	Contractor License Number 2705159715	Type Class B

DESCRIPTION OF WORK	Scope of Work: inground gunnite 20 x 40 concrete swimming pool with auto cover			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft. 800	Total Sq. Ft. 800	

Building Only - Excludes All Trades Permits

Value of Work: \$ 56,000.00 84,000

Application Fee	\$ 390.00
State Levy Fee	\$ 7.80
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
<b>Total</b>	<b>\$ 422.80</b>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: David M. [Signature] Date: 2/12/18



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
P.O. Box 119  
Goochland, VA 23063  
(804) 556-5815 Fax (804) 556-5651  
TDD 711 VA Relay

Application Date: 2-9-18

Permit Number: BP-2018-00090

GPIN/Tax Map: 7733-85-2909 / 68-40-9-0

Issued: 2-21-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential       Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>308 Randolph Square PKY, Richmond, Va 23230-6155</u>			
	Owner <u>Geoffrey W Smith, Jr. &amp; Kesti L Smith</u>	Phone # <u>804-301-1874</u>		
APPLICANT INFORMATION	Address <u>308 Randolph Square PKY</u>			
	Applicant/Contact <u>Exquisite pools</u>	Phone # <u>804-912-3331</u>		
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>17099 Chisholm Trl Rockville Va 23146</u>			
	Subdivision <u>Randolph Square</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>30' from Pavement</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>R2-1993-1</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>—</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer <u>David Floyd</u> Date <u>2/9/18</u> RPUD				

CONTRACTOR INFORMATION	Contractor <u>Exquisite Pools</u>		Phone <u>804-749-4400</u>
	Address <u>17099 Chisholm Trl Rockville Va</u>		
	Contractor License Number <u>2705752021</u>	Type <u>A</u>	Expiration <u>10-31-19</u>

DESCRIPTION OF WORK	Scope of Work: <u>In ground Gunite 20x40 swimming Pool with Auto Cover</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft. <u>800</u>	Unfinished Sq. Ft. <u>800</u>	Total Sq. Ft. <u>800</u>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>239.70</u>
Value of Work <u>50,600</u>		State Levy Fee \$ <u>4.79</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ <u>—</u>
Signature of Applicant <u>Muff E Young</u>	Date <u>2-9-2018</u>	Zoning Fee \$ <u>25.00</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>269.49</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Application Date: 12-1-17  
 Permit Number: BP-2017-00989  
 GPIN/Tax Map: 6767-03-6501/42-1-0-47A  
 Issued: 2-20-17

Residential  Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>2979 River Rd West</u>			
	Owner <u>Elrod &amp; Dunham Dentistry</u>		Phone #	
	Address <u>2979 River Rd West</u>		Email	
APPLICANT INFORMATION	Applicant/Contact <u>Travis Cole</u>		Phone # <u>804-263-5313</u>	
	Address <u>2312 Commerce Center Dr Suite B Rockville VA 23146</u>		Email <u>Travis@Carouselsigns.com</u>	
	TO BE COMPLETED BY ZONING DEPARTMENT			
Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>	
Front Setback <u>10' from ROW</u>	Center Line Setback <u>35'</u>	Rear Setback <u>—</u>	CUP/Variance/COA <u>Requires COA</u>	
Side Setback <u>—</u>	Side Setback <u>—</u>	Flood Zone <u>—</u>	COA-2017-10	
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Replacing old sign</u>		
Planning & Zoning Officer: <u>David [Signature]</u>	Date: <u>12/15/17</u>	RO		
CONTRACTOR INFORMATION	Contractor <u>Carousel Signs</u>		Phone <u>804-620-3200</u>	
	Address <u>2312 Commerce Center Dr Suite B Rockville VA 23146</u>			
	Contractor License Number <u>2705115473</u>	Type <u>A</u>	Expiration <u>6/30/2019</u>	
DESCRIPTION OF WORK	Scope of Work: <u>(1) Double Faced non-lit Aluminum Sign w Red Color Print mounted on Aluminum post</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work \$2,500

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 11/28/17



# BUILDING PERMIT APPLICATION

Application Date: 2/8/18

Department of Building Inspection  
P.O. Box 119  
Goochland, VA 23063  
(804) 556-5815 Fax (804) 556-5651  
TDD 711 VA Relay

Permit Number: BP-2018-00086

GPIN/Tax Map: 6151-87-3328 / 42-1-0620

Issued: 2-20-18

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential  Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>3207 River Rd West Goochland Va 23063 Lot B17</u>	
	Owner <u>Sandra C. Durette</u>	Phone # <u>804-651-9937</u>
	Address <u>3207 River Rd West Goochland Va 23063 Lot B17</u>	Email <u>sdurette@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Same as owner</u>	
	Address <u>Same as owner</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____			
Planning & Zoning Officer _____ Date _____				

CONTRACTOR INFORMATION	Contractor <u>owner</u>		Phone
	Address <u>2906 Avalon Drive Henrico, VA 23229</u>		
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Move existing mobile home to Lot B17 at Jenkins Trailer Park 2006 Clayton RD CLM084825TN</u>			
	Proposed Use <u>Personal residence</u>	Current Use	Existing Buildings on Property	# of Floors <u>1</u>
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <u>2</u>	# of Bedrooms <u>2</u>
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>14x72</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$ 3500.00</u>
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Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	<b>\$ <u>30.60</u></b>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Sandra C. Durette Date 2/8/18